

New Jersey Department of Education
EMERGENCY IMMIGRANT EDUCATION PROGRAM
Fiscal Year 2000 Amendment Application Project Period 9/1/99 to 8/31/00

1. PROJECT NUMBER: EIEP		00. LEA :		3. County:			
4. Contact Person:		4a. Tel. #		4b. Fax #			
5. Address:				6. Approved Award FY 2000 \$			
7. List reason(s) funds will not be expended as approved. Attach a separate sheet if necessary.							
8. EXPENDITURE CATEGORY	8a. FUNCTION OBJECT CODE	8b. FAMILY LITERACY	8c. TRAINED PERSONNEL	8d. ACADEMIC CAREER COUNSEL	8e. BASIC INSTRUCTIONAL SERVICE	8f. ED SOFTWARE TECH	8g. TOTAL
INSTRUCTION							
Salaries of Teachers	100-101						
Other Salaries for Instruction	100-106						
Purchased Prof. & Technical Services	100-300						
Other Pur. Serv. (400-500 series)	100-500						
General Supplies	100-610						
Textbooks	100-640						
Other Objects	100-800						
SUBTOTAL INSTRUCTION							
SUPPORT SERVICES	200-						
	200-						
	200-						
	200-						
SUBTOTAL – SUPPORT SERVICES							
FACILITIES ACQUISITION & CONST SERVICE							
Buildings (Use Charge)	400-720						
Instructional Equipment	400-731						
Noninstructional Equipment	400-732						
SUBTOTAL - FACILITIES ACQ & CONSTR							
TOTAL FUNDS							
GRAND TOTAL FUNDS							
9. To the best of our knowledge, we certify that this report is accurate.							
Approved by Chief School Administrator:				(Signature): _____ Date: _____			
Approved by Board Secretary/Sch. Bus. Admin.:				(Signature): _____ Date: _____			
				Board Approval Date: _____			
FY 2000 Budget Amendment Approval For State Use Only							
Denied		Approved		Date:	OBEI Signature:		
Denied		Approved		Date:	OGMD Signature:		

INSTRUCTIONS FOR COMPLETING AMENDMENT APPLICATION FORM

- Section 1 List the four-digit district code after the "EIEP".
- Sections 2 – 5 Complete all the identifying information.
- Section 6 Enter your district's approved FY 2000 award.
- Section 7 Provide a brief but specific explanation of why funds will not be expended as originally approved.
Clearly indicate the changes proposed (e.g. change in goals, objectives, and activities).
- Sections 8-8a For the Support Services expenditure category (column 8), write in those items and function/object codes (column 8a) as needed to identify the expended funds.
- Section 8b – 8f Enter by line item the amount budgeted from the originally approved budget for all categories and add the changes.
- Section 8g Enter totals by line items and total the column at the bottom under grand total funds.
- Section 9 Have the Chief School Administrator and Board Secretary/School Business Administrator sign and date the application. List the date that the revisions were approved by the board of education.

Send the original and one copy of this Budget Amendment Request Form to:

Darlene M. Mincy, Acting Director
New Jersey Department of Education
Office of Bilingual Education & Equity Issues
P.O. Box 500
Trenton, New Jersey 08625-0500

Please maintain a copy of the form in the district office.

FY 2000 Budget Amendment Request Form Submission Deadline: MAY 1, 2000